Early Tactile Communication: Touch, Cues, and Signing
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A question that is often asked when it comes to students identified as deafblind is, “What type of communication should be used and how do I get started?” Often the misconception is, if a student is identified as deafblind they should automatically be taught to use tactile sign language (signing using touch, usually by touching and making signs in the other person’s hand) as their first form of learning to communicate. However, this is not always the case. Most often, other forms of tactile communication need to be introduced first and then build up toward tactile sign language.

In this article, I will explain the different forms of tactile communication used with students who are deafblind and when it may be appropriate to use each form of communication. Please keep in mind this is just a guide and may not apply to each individual student in the same way, but hopefully will give you an overview and starting point. It is good to refer to the deafblind project in your state and request technical assistance if you want a more in-depth approach to helping your student with deafblindness.

It is important to understand that even though our goals and expectations should be to reach the highest form of communication, not all students with deafblindness will become complex communicators (OHOA, module 8). It is important to keep in mind the individual needs of the student when developing a communication system.

Two terms we will refer to in this article are Receptive Communication (how the child receives communication) and Expressive Communication (how the child expresses or shares desires, emotions, or ideas to others).

Nonsymbolic/Presymbolic Communication

During this stage, a child communicates through behaviors that usually reflect a general state of being such as that they are comfortable, sleepy, upset, etc. It is up to the caregivers to apply meaning to those behaviors in order to interpret what the child needs or how they are feeling. Children who are deafblind may be very subtle in the expressive behaviors, and those closest to the child will need to bond with them and observe carefully to be able to interpret and discern the child’s needs or desires being expressed. The child’s body movements, facial expressions, or sounds are the behaviors that need to be interpreted to understand what the child is trying to let us know. Pointing, nodding, waving, hugging, looking for a person or desired object, and other non-signing simple physical gestures are still considered forms of presymbolic communication (OHOA, module 8). Presymbolic communication in this situation means that the communicated behaviors are directly related to the emotions and actions being felt right then and do not represent other separate concepts.

TOUCH CUES defined

“Touch cues are physical cues that are used in a consistent manner on the child or adult’s body to give a specific message about what is about to happen to the person. In most cases, the touch cue will be at or near the body part that will be affected and if the touch cue is used to prepare the child for movement, the touch will give the child information about the direction their body will move”
~ (Belote, Fact Sheet) Please refer to the fact sheet for a more detailed explanation and examples.
The first form of tactile communication that should normally be introduced is called Touch Cues. Touch Cues are a form of receptive communication that gives the individual with limited or no functional use of their vision and hearing an indication that something is about to happen to their body. For example, to indicate to a child that they are about to be picked up from a chair, the caregiver may give two or three gentle taps in the armpits in an upward direction (Belote, Touch Cues Fact Sheet). Often, touch cues are used for individuals at a presymbolic language level. Touch cues should be introduced and used consistently from the very beginning of any communication, especially if the child has little to no usable vision and hearing.

It is important to remember during the nonsymbolic and presymbolic stages of communication that the child’s expressive communication will likely be subtle and usually exhibited through behaviors. An indicator that the child understands the information that is given to them (receptive communication) is if they change how they then respond to the action that occurs after the touch cue communication. For example, if in the past every time they were picked up and moved they responded by tensing up, crying, anxiety, etc. and now they are calmer and seem to have less anxiety and tension, that is an indicator that they understood the touch cue indicating that they were about to be picked up and moved. Touch cues allow the opportunity for the child to understand ahead of time (anticipation) of what will be happening to him or her before it happens.

Each child is different and close observation of the child’s actions, movements, and expressions is needed to understand what they are trying to tell you. One individual being observed had exhibited self-abusive behavior so other similar motions were assumed to be related and the child trying to share that his leg hurt was being missed. The self-abusive behavior was hitting his leg with a closed fist. In contrast, his way of expressing discomfort was by grabbing his leg open handed and pulling on it. After the difference was pointed out to the caregivers, they were able to respond differently and the child then stopped crying because they were able to understand the message and fix the problem. The differences are subtle but they are there.

Concrete Symbolic Communication

The use of concrete symbols is the beginning of symbolic communication. Concrete symbols would include pictures to represent the objects pictured within (if the child has functional vision), objects, iconic gestures (pat chair to mean sit), and sounds (buzz sound to represent bee). These symbols have meaning to the child in their immediate physical environment. This means the symbols will look, feel, move, and sound like what they represent to the individual with deafblindness (OHOA, module 8). It is important to keep in mind that the perception of the same object by a child with deafblindness will be different from a peer who has full use of their hearing and vision. For example, a miniature replica of a bus (visual perspective) would have no meaning to an individual who is deafblind and had not seen a whole bus before, but a piece of the seatbelt (tactile perspective) that he or she wears on the bus would have meaning representing the idea of “bus” because that is what he or she feels when they are sitting on the bus.
During this stage, the individual with deafblindness would be learning (receptively) all the common symbols that represent meaningful activities and people in his or her life by using name and object cues. Building off the step of Touch Cues that let a child anticipate an activity, Name Cues can help identify the person who is there with them and help them start identifying different people with different activities.

Introducing name cues and object cues provides opportunities for a child with deafblindness to communicate in a more effective manner instead of just through behaviors such as pushing things away, throwing a tantrum, etc. However, please keep in mind that the student still may not be able to use expressive communication in the way we perceive or expect language to happen. For example, he or she may be able to understand the activities and recognize who is working with them based on the name and object cues, but that does not necessarily mean they can take those same objects and mirror it back in the same way expressively it was presented to them. His or her expressive communication may be as subtle as change in behavior, facial expressions, expressing emotion (crying) etc.

The first step to initiating expressive communication with objects is to use two objects to represent a choice between two activities and see if they select one. If the child has limited movement, his or her choice making may be as subtle as eye movement towards the object they chose.

With some individuals who are deafblind, concrete symbols may be the only type of symbols that make sense to them; however for others it may be a bridge to using abstract symbols such as coactive and tactile signing.

**Abstract Symbolic Communication**

Abstract symbolic communication is a higher form of communication because the symbols may not be physically similar to what they represent. Examples of abstract symbols are speech, manual signs, (like ASL or tactile) and Braille or printed words (OHOA, module 8). With individuals who are deafblind, coactive and tactile signing would be a form of abstract symbolic communication. Some examples of a combination of concrete and abstract symbols would be 2-3 word phrases such as “want-eat” or “me-go-home”. The development of abstract symbolic communication (expressively) can be difficult for individuals with deafblindness. Concept development is necessary for the child to use abstract symbols and will take time with a great deal of assistance (OHOA, module 8).

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**WHAT IS COACTIVE SIGNING?**

“Coactive signing involves taking the child’s hands and, in a respectful way, molding the child’s hands through the signs, so that you are helping the child make the signs” (Rodriguez-Gil & Belote, 2005, p. 1). Please refer to the article for detailed information on understanding coactive signing and when it should be used.

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**WHAT IS TACTILE SIGNING?**

“Tactile signing is used when the person places his or her hands under the child’s hands to express something to the child” (Rodriguez-Gil & Belote, 2005, p. 1). Please refer to the article for detailed information on understanding tactile signing and when it should be used.
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